A 29298

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956 Fax: 850.656.7953 www.incserv.com e-mail: accounting@incserv.com

ORDER FORM

FROM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE; 3/23/2023	PRIORITY Regular Approval	OUR REF # (Order ID#) 1132693
ORDER ENTITY		
OAK RUN ASSOCIATES, LTD.		

PLEASE PERFORM THE FOLLOWING SERVICES	••••	 	-*•	 -	aa
OAK RUN ASSOCIATES, LTD. (FL)		 · · ·	-	 	

File the attached correction document and provide a certified copy.

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NOTES:		•		·	 		 	 			•		j
\$105.00 Authorized													

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RETURN/FORWARDING INSTRUCTIONS:	-	 	

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please indude the thru date on the results.

COVER LETTER

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TO: **Registration Section** Division of Corporations

SUBJECT: Oak Run Associates, Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

.

Priya Ghumman							
	Contact Person						
Oak Run Associates, L	1d.						
	Firm/Company						
8825 SW 110th St							
	Address						
Ocala, Fl, 34481							
	City, State and Zip Code						
pghumman@atsurecon	npliance.com						
E-mail address: (t	o be used for future annual	report notification)					
For further informa	tion concerning this ma	atter, please call:					
Priya Ghumman		at $(^{352}$	266-9	9533			
Name of Cont	lact Person		nd Day	time Telephone Number			
Enclosed is a check	for the following amo	unt:					
□\$52.50 Filing Fee	■\$61.25 Filing Fee and Certificate of Status	Ø\$105.00 Filing and Certified Cop		St113.75 Filing Fee, Certified Copy, and Certificate of Status			
Mailing Address: Registration Section		<u>Street /</u> Registre					
Division of Corpora		Registration Section Division of Corporations					
P.O. Box 6327				fTallahassee			
Tallahassee, FL 321	314	2415 N	. Mor	roe Street, Suite 810			

Tallahassee, FL 32303

ED 2023 H R 23 PM 12: 04 STATEMENT OF CORRECTION SELENE TARY OF STATE FOR FLORIDA OR FOREIGN LIMITED PARTNERSHIP OR. LIMITED LIABILITY LIMITED PARTNERSHIP

Oak Run Associates, Ltd.

Insert name currently on file with Florida Department of State

A29298

Florida Document Number of Limited Partnership or Limited Liability Limited Partnership

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following statement of correction.

FIRST: The reason for filing this statement of correction is:The record contained false or erroneous information.The record was defectively signed.

SECOND: This statement corrects Certificate of Limited Partnership

Specify document type being corrected filed with the Florida Department of State on December 6, 1989

Insert date document filed with Dept. of State

THIRD: The false or erroneous information or defect is as follows: The latest date upon which the limited partnership is to dissolve is: December 31, 2009.

FOURTH: The false or erroneous information or defect is corrected as follows: The latest date upon which the limited partnership is to dissolve is: December 31, 2049.

Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

By. Development & Construction Corporation of America, General Partner

By: Prive Ghumman, President, Development & Construction Corporation of America

Signature(s) of <u>new</u> general partner(s), if any:

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation below)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

2023 HAR 23 : 1 PH 12: 11 ç